Gila County Health & Emergency Management



5515 South Apache Ave., Suite 100, Globe, AZ 85501 PHONE: (928) 402-8811 | FAX: (928) 425-8817



107 W. Frontier Rd., Suite A, Payson, AZ 85541 PHONE: (928) 474-1210 | FAX: (928) 474-7069

Temporary Food Vendor Permit Application

Print legibly and complete this form entirely, including the signature.

Return this form with the permit fee no later than 2 weeks prior to the event

(check or money order) payable to GCHEM to:

Gila County Public Health Division

5515 S Apache Ave, Suite 100, Globe, AZ 85501 or 107 W Frontier Ave, Suite A, Payson, AZ 85541

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Permit Fee Enclosed	\$	Permit fee is \$30 for a one-day event \$60 for a two to 14 day event			
Facility Name					
Permit Type	Temporary Vendor	Owner			
Mailing Address					
Phone Number		Email			
		Event Information	n		
Name of Event					
Location of Event					
Date(s) of Event					
Please list all foods and	d drinks you plan on selling o	r attach a menu to th	is application:		
compliance with the Staunderstand failure to op I have read and understa	ate of Arizona and Gila County Hoperate the facility described above and the Temporary Food Booth Requ	ealth & Emergency Serve in accordance with law	ion. I agree said business will be conductices regulations and laws pertaining to it may result in permit revocation and cessints. Date	s operation. I also	
Signature			Date		
Printed Name			Title		
		OFFICE USE ONLY			
Check Number:					
Receipt Number:			Andhaning Cianatana	Doto	
Permit Number:			Authorizing Signature	Date	